Corporati on Skilled No Yes 96

County: Douglas MIDDLE RIVER HEALTH CARE CENTER 8274 EAST SAN ROAD 82/4 EAST SAN ROAD
SOUTH RANGE 54874 Phone: (715) 398-3523
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 102
Total Licensed Bed Capacity (12/31/00): 102
Number of Residents on 12/31/00: 94 Ownership: Highest Level License: Operate in Conjunction with CBRF? Title 18 (Medicare) Certified? Average Daily Census:

Services Prov	ided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/00	0) %					
Home Health Casupp. Home Casupp. Home Casupp. Home Casupy Services Respite Care Adult Day Care Adult Day Healtone Delivere Other Meals Transportation Referral Services	are re-Personal Care re-Household Services e lth Care als d Meals	No No No No No No No No No No	Primary Diagnosis Developmental Disabilities Mental Illness (Org./Psy) Mental Illness (Other) Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic Cancer Fractures Cardiovascular Cerebrovascular Diabetes	2. 1 29. 8 5. 3 0. 0 1. 1 2. 1 23. 4 9. 6 2. 1 3. 2	Age Groups Under 65 65 - 74 75 - 84 85 - 94 95 & Over Sex	3. 2 4. 3 40. 4 46. 8 5. 3 	Less Than 1 Year 1 - 4 Years More Than 4 Years ************************* Full-Time Equivale Nursing Staff per 100 1 (12/31/00) RNs LPNs	29. 8 42. 6 27. 7 100. 0 ************		
Other Services Provide Day Provide Day II	rogramming for	Yes No	Respiratory Other Medical Conditions	20. 2	Male Female	29. 8 70. 2	Nursing Assistants Aides & Orderlies	41.8		
Mentally II Provide Day P Development	l rogramming for ally Disabled	No No		100. 0	Female	70. 2 100. 0				
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Method of Reimbursement

	Medicare (Title 18)				Medicaid (Title 19)			0ther		P	Private Pay			Manage	d Care		Percent
	Per Diem			m	Per Diem		Per Diem			Per Diem		Per Diem To			Of All		
Level of Care	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	1	50. 0	\$352. 40	5	6. 7	\$115.30	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	6	6. 4%
Skilled Care	1	50. 0	\$274.72	64	85.3	\$97. 96	0	0. 0	\$0.00	16	94. 1	\$107.00	0	0. 0	\$0.00	81	86. 2%
Intermedi ate				4	5.3	\$80.62	0	0.0	\$0.00	1	5. 9	\$107.00	0	0.0	\$0.00	5	5. 3%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				2	2.7	\$138.43	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	2	2. 1%
Traumatic Brain Inj	. 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	2	100.0		75	100. 0		0	0.0		17	100.0		0	0.0		94	100.0%

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needing Total Assi stance of Percent Admissions from: Activities of % Totally Number of Private Home/No Home Health Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents 5.7 Private Home/With Home Health 4. 1 Baťhi ng 1.1 73.4 25. 5 94 Other Nursing Homes 11.5 Dressi ng 3. 2 71.3 25. 5 94 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferri ng 33.0 77.0 54.3 12.8 94 94 0.8 Toilet Use 28.7 44.7 26.6 0.0 Eating 27.7 17.0 94 Other Locations **** 0.8 Total Number of Admissions 122 Continence Special Treatments Indwelling Or External Catheter Percent Discharges To: Receiving Respiratory Care 8. 5 5. 3 Receiving Tracheostomy Care Private Home/No Home Health 20.8 Occ/Freq. Incontinent of Bladder 44.7 0.0 Receiving Suctioning Receiving Ostomy Care Private Home/With Home Health 5.8 Occ/Freq. Incontinent of Bowel 39.4 0.0 Other Nursing Homes 6. 7 3. 2 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 32.5 2. 1 Mobility Physically Restrained 12.8 1.7 37. 2 0.0 Other Locations 0.0 Skin Care Other Resident Characteristics Deaths 32.5 With Pressure Sores 5. 3 Have Advance Directives 86. 2 Total Number of Discharges With Rashes Medi cati ons 7.4 Receiving Psychoactive Drugs 120 **59.** 6 (Including Deaths)

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Ownershi p:		Bed Size:		Li censure:			
	Thi s	Pro	pri etary	100-	- 199	Ski l	led	Al l	
	Facility	Peer	Group	Peer	Group	Peer Group		Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94. 1	82. 5	1. 14	83. 6	1. 13	84. 1	1. 12	84. 5	1. 11
Current Residents from In-County	84. 0	83. 3	1. 01	86. 1	0. 98	83. 5	1. 01	77. 5	1.08
Admissions from In-County, Still Residing	19. 7	19. 9	0. 99	22. 5	0. 87	22. 9	0. 86	21. 5	0. 91
Admi ssi ons/Average Daily Census	127. 1	170. 1	0. 75	144. 6	0. 88	134. 3	0. 95	124. 3	1.02
Discharges/Average Daily Census	125. 0	170. 7	0. 73	146. 1	0.86	135. 6	0. 92	126. 1	0. 99
Discharges To Private Residence/Average Daily Census	33. 3	70.8	0.47	56 . 1	0. 59	53. 6	0. 62	49. 9	0.67
Residents Receiving Skilled Care	92. 6	91. 2	1. 02	91. 5	1.01	90. 1	1. 03	83. 3	1. 11
Residents Aged 65 and Older	96. 8	93. 7	1.03	92. 9	1.04	92. 7	1. 04	87. 7	1. 10
Title 19 (Medicaid) Funded Residents	79. 8	62 . 6	1. 27	63. 9	1. 25	63. 5	1. 26	69. 0	1. 16
Private Pay Funded Residents	18. 1	24. 4	0. 74	24. 5	0.74	27. 0	0. 67	22. 6	0.80
Developmentally Disabled Residents	2. 1	0.8	2. 76	0.8	2. 59	1. 3	1. 69	7. 6	0. 28
Mentally Ill Residents	35. 1	30. 6	1. 15	36. 0	0. 97	37. 3	0. 94	33. 3	1.05
General Medical Service Residents	20. 2	19. 9	1. 02	21. 1	0. 96	19. 2	1. 05	18. 4	1. 10
Impaired ADL (Mean)	48. 9	48. 6	1.01	50. 5	0. 97	49. 7	0. 98	49. 4	0. 99
Psychological Problems	59. 6	47. 2	1. 26	49. 4	1. 21	50. 7	1. 17	50. 1	1. 19
Nursing Care Required (Mean)	7. 6	6. 2	1. 23	6. 2	1. 23	6. 4	1. 18	7. 2	1.06